



PTO/SB/21 (08-00)

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**TRANSMITTAL  
FORM***(to be used for all correspondence after initial filing)*

Application Number	10/612,648
Filing Date	July 2, 2003
First Named Inventor	Clouatre
Group Art Unit	1614
Examiner Name	Not Yet Assigned
Attorney Docket Number	71286.010510

Total Number of Pages in This Submission

**ENCLOSURES (check all that apply)**

- |  |  |   |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request (3 months)<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input checked="" type="checkbox"/> Assignment (copy)<br><input type="checkbox"/> Substitute Drawing (Figure 1))<br><input type="checkbox"/> Licensing-related Papers<br><input checked="" type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Revocation and New Power of Attorney<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> Diskette; Number of diskettes:<br><div>Remarks</div> | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><b>Postcard</b><br><b>Express Mail Label No. EV</b><br><b>426280445 US</b> |
|--|--|---|

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	James F. Ewing, Reg. No. 52,875	Greenberg Traurig, LLP
Signature		
Date	June 3, 2004	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.



# FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 485

## Complete if Known

Application Number	10/612,648
Filing Date	July 2, 2003
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## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit  
Account  
Number

50-2678

Deposit  
Account  
Name

Greenberg Traurig, LLP

- ☒ Charge Any Additional Fee Required  
Under 37 CFR 1.16 and 1.17  
☒ Applicant claims small entity status.  
See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money ☐ Other  
Order

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	2001	750	375	Utility filing fee	
1002	2002	330	165	Design filing fee	
1003	2003	520	260	Plant filing fee	
1004	2004	750	375	Reissue filing fee	
1005	205	160	80	Provisional filing fee	

SUBTOTAL (1)

(\$) 0

### 2. EXTRA CLAIM FEES

Total Claims	-20 **	=	0	X	0	=	0
Independent Claims	-3 **	=	0	X	0	=	0
Multiple Dependent		X				=	0

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	2202	18	9	Claims in excess of 20	
1201	2201	84	42	Independent claims in excess of 3	
1203	2203	280	140	Multiple dependent claim, if not paid	
1204	2204	84	42	** Reissue independent claims over original patent	
1205	2205	18	9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2)

(\$) 0

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	2051	130	65	Surcharge - late filing fee or oath	
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet.	
1053	1053	130	130	Non-English specification	
1812	1812	2,520	2,520	For filing a request for reexamination	
1804	1804	920*	920*	Requesting publication of SIR prior to Examiner action	
1805	1805	1,840*	1,840*	Requesting publication of SIR after Examiner action	
1251	2251	110	55	Extension for reply within first month	
1252	2252	410	205	Extension for reply within second month	
1253	2253	930	465	Extension for reply within third month	475
1254	2254	1,450	725	Extension for reply within fourth month	
1255	2255	1,970	985	Extension for reply within fifth month	
1401	2401	320	160	Notice of Appeal	
1402	2402	320	160	Filing a brief in support of an appeal	
1403	2403	280	140	Request for oral hearing	
1451	1451	1,510	1,510	Petition to institute a public use proceeding	
1452	2452	110	55	Petition to revive - unavoidable	
1453	2453	1,300	650	Petition to revive - unintentional	
1501	2501	1,300	650	Utility issue fee (or reissue)	
1502	2502	470	235	Design issue fee	
1503	2503	630	315	Plant issue fee	
1460	1460	130	130	Petitions to the Commissioner	
1807	1807	50	50	Processing fee under 37 CFR 1.17 (q)	
1806	1806	180	180	Submission of Information Disclosure Stmt	
8021	8021	40	40	Recording each patent assignment per property (times number of properties)	
1809	2809	750	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	2810	750	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	2801	750	375	Request for Continued Examination (RCE)	
1802	1802	900	900	Request for expedited examination of a design application	
Other fee (specify) <u>Statutory basic filing fee</u>					10

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$) 485

## SUBMITTED BY

## Complete (if applicable)

Name (Print/Type)	James F. Ewing	Registration No./Attorney/Agent	52,875	Telephone	617-310-6000
Signature		Date	June 3, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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